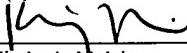




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By:	 Kimberly Melvin

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No.	:	10/056,418	Confirmation No.:	8065
Applicant	:	Todd Campbell		
Filed	:	January 22, 2002		
TC/A.U.	:	3731		
Examiner	:	Vi X Nguyen		
Docket No.	:	PA895		
Customer No.	:	28390		
Title	:	Stent Assembly With Therapeutic Agent Exterior Banding		

Mail Stop AMENDMENT
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GROUP 360C
AMENDMENT

Sir:

In response to the Office Action mailed September 8, 2004, please amend the above-identified application as set forth below. This reply is being submitted within 3 months of the mailing date of the office action.

Amendments to the Claims are reflected in the listing of claims, which begin on page two (2) of this paper.

Remarks/Arguments begin on page eight (8) of this paper.

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/056,415
Filing Date	January 22, 2002
First Named Inventor	CAMPBELL, Todd
Art Unit	3731
Examiner Name	Vi X NGUYEN
Attorney Docket Number	PA895

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Name	Medtronic Vascular, Inc.
Signature	
Printed name	Alan M. Krubiner
Date	November 22, 2004
	Reg. No. 26,289

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Signature			
Typed or printed name	Kimberly Melvin	Date	November 22, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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